PROFORMA INVOICE

Date: [Date]
Invoice #: [Number]

[Carrier Company Name]
[Address Line 1]
[City, State, Zip]
[Contact Email/Phone]

CONSIGNOR (SHIPPER)

[Company Name]
[Address]
[Contact Person]
[Phone/Tax ID]

CONSIGNEE (RECIPIENT)

[Company Name]
[Address]
[Contact Person]
[Phone/Tax ID]

SHIPMENT DETAILS

Carrier: [Name]
Mode: [Air/Sea/Road]
Origin: [Port/City]
Destination: [Port/City]

PAYMENT TERMS

Currency: [USD/EUR/etc]
Terms: [Net 30 / Prepaid]
BOL/AWB #: [Number]

Description of Goods / Services	Qty/Weight	Unit Price	Total
[Freight Charges - Route Details]	[Units]	[Price]	[Total]

Description of Goods / Services	Qty/Weight	Unit Price	Total
[Fuel Surcharge]	[Percentage]	[Price]	[Total]
[Handling/Documentation Fees]	[Units]	[Price]	[Total]

Subtotal: [0.00]
Tax / VAT: [0.00]
Total Amount Due: [0.00]

NOTES & BANK INSTRUCTIONS

Beneficiary: [Name] | Bank: [Name] | SWIFT/BIC: [Code] | IBAN: [Number]

This is a proforma invoice provided for customs or payment processing purposes prior to final shipping documentation.